## La3000045430

(Requ	uestor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/	State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Busi	ness Entity Nar	me)
(Docu	ıment Number)	
Certified Copies	Certificate	s of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



800407796728

05/01/23--01020--006 \*\*25.00



Y. SCOTT
JUN 1 8 2023

## **COVER LETTER**

SUBJECT: OCY Services LLC  Name of Limited Liability Company	:
Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Yesenia Perez	
Name of Person	
OCY Services LLC  Firm/Company  7978 Lioucide Do	
Firm/Company	C.
7928 Linkside Dr	
Address	
Jacksonville FL 32256	
City/State and Zip Code	
Crisenia designs e amail.com  E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
ANI 200 7512	
Name of Person at (304) 302 1542  Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee Solution Signature Solution Signa	
Mailing Address: Street Address:	
Registration Section Registration Section	
Division of Corporations P.O. Box 6327  Division of Corporations The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

* OCY Service	es.IIC
( <u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records.) imited Liability Company)
The Articles of Organization for this Limited Liability Cor Florida document number <u>1.2300045430</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited OCY SOLUTIONS L.  The new name must be distinguishable and contain the words "Limited Name of the limited Name of N	d liability company here:  L C  d Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRES	SS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	023
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	ffice address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zip Code

## New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	<u>Cristian Perez</u>		XVqq
			Remove
			□ Change
			🗆 Add
			Remove
			Change
		T (Remove	
		- <u>-</u> .	
			□ Add
			Remove
			Change
<u> </u>			<del></del>
			——————————————————————————————————————
			□ Change

						<del></del>
	<del></del>			····		
		<del></del>		_ <del></del> .		
		_			2023	
					11.1	
					,,	3 3
_						?-
						2
			•			
ctive date, if other that effective date is listed, the d	an the date of filit ate must be specific ar	ng:	to date of filing or i		optional) after filing.)	Pursuant to 605.
e: If the date inserted in iment's effective date on	this block does not	meet the applica				
	· · · · · · · · · · · · · · · · · · ·					
ord specifies a delayed e	effective date, but no	ot an effective ti	me, at 12:01 a.m	on the earlier o	of: (b) The	90th day after
filed.						
ed March	310	. 2023	<u></u>			
	1		1) 5			
	1 11	•	1//			

Filing Fee: \$25.00